OMB#: 2050-0034 Expires 11/30/2005

SEND COMPLETED FORM TO:	United States Environmental	vironmental Protection Agency					
The Appropriate State or EPA Regional Office.	RCRA SUBTITLE C SITE IDEN						
1. Reason for	Reason for Submittal:						
Submittal (See instructions on page 14.)	☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)						
MARK ALL BOX(ES)	☐ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)						
THAT APPLY	☐ As a component of a First RCRA Hazardous Waste Part A Permit Application						
	As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)						
	☐ As a component of the Hazardous Waste Report						
2. Site EPA ID Number (page 15)	EPA ID Number M D D 0 0 1 7 3 7 1 3 9 5						
3. Site Name (page 15)	Name: SAFETY-KLEEN SYSTEMS, INC.						
4. Site Location	Street Address: 12164 TECH ROAD						
Information (page 15)	City, Town, or Village: SILVER SPRINGS		State: MD				
	County Name: MONTGOMERY		Zip Code: 20904				
5. Site Land Type (page 15)	Site Land Type: Private County District Federal Indian Municipal State Other						
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 15)	A. 5 6 2 1 1 2	B. I_	_				
	c.	D. I_	_	l			
7. Site Mailing	Street or P. O. Box: 4800 S OLD PEACH TREE ROAD						
Address (page 16)	City, Town, or Village: NORCROSS						
	State: GA						
- 1-0-40-4	Country: USA		Zip Code: 30071				
8. Site Contact Person	First Name: GERHARD	MI: L	Last Name: RISSE				
(page 16)	Phone Number: 707-418-1860 Extension:		Email address:				
9. Operator and Legal Owner of the Site (pages 16 and 17)	A. Name of Site's Operator: GERHARD RISSE		Date Became Operator (mm/dd/yyyy):				
	Operator Type: ☑ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other						
	B. Name of Site's Legal Owner: DEVELOPERS DIVERSIFIED RE	Date Became Owner (mm/dd/yyyy):					
	Owner Type: Private County District	☐ Federal	☐ Indian ☐ Municipal	☐ State ☐ Other			

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9. Legal Owner (Continued)	Street or P. O. Box: 3300 Enterprise Parkway						
Address	City, Town, or Village: Beachwood						
	State: Beachwood	***************************************					
	Country: USA		Zip Code: 44122				
10. Type of Regulated Mark "Yes" or "No"		/ additional boxes :	as instructed	l. (See instructions on pages 18 to 21.)			
A. Hazardous Was Complete all par	te Activities rts for 1 through 6.						
Y□N□ 1. Generator of			YONO 2	2. Transporter of Hazardous Waste			
If "Yes", ch	loose only one of the following	- a, b, or c.	V D N D 1	Transac Storage or Diamonar of			
🗖 a. LQG:	Greater than 1,000 kg/mo (2,200 of non-acute hazardous waste;	T 14 14 14 14	3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.				
☐ b. SQG:	100 to 1,000 kg/mo (220 - 2,200 of non-acute hazardous waste;	Y 🗆 N 🗆 4	i. Recycler of Hazardous Waste (at your				
☐ c. CESC	QG: Less than 100 kg/mo (220 lbs of non-acute hazardous waste		Y 🗆 N 🗆 5	site) 5. Exempt Boiler and/or Industrial			
In addition, in	ndicate other generator activitie	es.		Furnace If "Yes", mark each that applies.			
Y 🗖 N 🗖 d. Unite	d States Importer of Hazardous W	/aste		☐ a. Small Quantity On-site Burner Exemption			
Y □ N □ e. Mixed	d Waste (hazardous and radioacti	ve) Generator		b. Smelting, Melting, and Refining Furnace Exemption			
			YONO 6	. Underground Injection Control			
B. Universal Waste	: Activities		C. Used Oil Activities Mark all boxes that apply.				
5,000 kg or determine v waste gene	ntity Handler of Universal Waste more) [refer to your State regu what is regulated]. Indicate type trated and/or accumulated at yo	Y □ N □ 1. Used Oil Transporter If "Yes", mark each that applies. □ a. Transporter					
mark all 903	xes that apply: Generate	<u>Accumulate</u>	V3.00	D b. Transfer Facility			
a. Batteries	0	٥	YUNUZ.	Used Oil Processor and/or Re-refiner If "Yes", mark each that applies.			
b. Pesticides	0	0		☐ a. Processor☐ b. Re-refiner			
c. Thermosta	ts 🔾	0					
d. Lamps	0	a	Y 🗆 N 🗆 3.	Off-Specification Used Oil Burner			
e. Other (spe	cify)	0	Y 0 N 0 4.	Used Oil Fuel Marketer			
f. Other (spe	cify)			If "Yes", mark each that applies. a. Marketer Who Directs Shipment of			
g. Other (spe	cify)	0		Off-Specification Used Oil to Off-Specification Used Oil Burner			
	Facility for Universal Waste rdous waste permit may be require	ed for this activity.		□ b. Marketer Who First Claims the Used Oil Meets the Specifications			

EPA ID NO: I_	MIDIDIIO	1010117	13171131	9 [5]	OMB#: 2050-0034	Expires 11/30/200
11. Description o	of Hazardous Waste	es (See instruction	ns on page 22.)			
handled at y		n the order they are			of the Federal hazar 1, D003, F007, U112	
hazardous w		ur site. List them ir			e waste codes of the	
12. Comments (S	See instructions on	page 22.)		•		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		····				
in accordance with on my inquiry of the information submit penalties for submit	a system designed e person or persons ted is, to the best of itting false information ardous Waste Part	to assure that quali who manage the s my knowledge and on, including the po	ified personnel proper ystem, or those person belief, true, accurate ssibility of fine and in	erly gather and eval sons directly respon e, and complete. I a nprisonment for kno	pared under my direct uate the information s sible for gathering the om aware that there a owing violations. In (see 40 CFR 270.10	submitted. Based e information, the re significant
Signature of oper authorized repres	rator, owner, or an sentative	Name and Offi	cial Title (type or p	rint)		Date Signed (mm/dd/yyyy)
an house	for	LEN LONGS,	HORE SR. VI	of EHS		09/28/2005
1110						1 1 2 2 2 3 3